| PATENT APPLICATION FEE DETERMINATION RECORD  Effective January 1, 2003   |  |   |                |                                      |                  |                          |      |                    |                        |               |                     |                        |
|--|--|---|----------------|--------------------------------------|------------------|--------------------------|------|--------------------|------------------------|---------------|---------------------|------------------------|
| CLAIMS AS FILED - PART I SMALL ENTITY OTHER T  (Column 1) (Column 2) TYPE OR SMALL EN                          |  |   |                |                                      |                  |                          |      |                    |                        |               |                     |                        |
| Ľ  | OTAL CLAIMS                                    |   | 18             |                                      |                  |                          | 1    | RATE               | FEE                    | 7             | RATE                | FEE                    |
| FOR  |  |   | NUMBER FILEO   |                                      | NUMBER EXTRA     |                          |      | BASIC FE           | ₹ 375.00               | OR            | BASIC FEE           |                        |
| T  | OTAL CHARGE                                    | ABLE CLAIMS                               | / 8minus 20+   |                                      | . /              |                          |      | X\$ 9.             | 1                      | 1             |                     |                        |
| IN   | DEPENDENT C                                    | LAIMS                                     | · Q minus 3 •  |                                      | •                |                          |      | X42=               | <del> </del>           | OR            | <u> </u>            |                        |
| M  | ULTIPLE DEPE                                   | NDENT CLAIM P                             |                |                                      |                  |                          |      | X42=               | <del> </del>           | OR            | X84=                |                        |
|  |  |   |                |                                      |                  |                          |      | +140=              |                        | OR            | +280=               | ·                      |
| * If the difference in column 1 is less than zero, enter *0" in column 2                                       |  |   |                |                                      |                  |                          |      | TOTAL              | 375                    | OR            | TOTAL               |                        |
| CLAIMS AS AMENDED - PART II  OTHER THAI  (-10-05 (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY |  |   |                |                                      |                  |                          |      |                    |                        |               |                     |                        |
| _  | 120.03   | (Column 1)<br>GLAIMS                      |                | (Colum                               | <b>.</b> 51      | (Column 3)               |      | SMALL              | ADDI                   | OR<br>1       | SMALL               |                        |
| AMENDMENT A  |  | REMAINING<br>AFTER<br>AMENDMENT           |                | PREVIO<br>PAID F                     | USLY             | PRESENT<br>EXTRA         |      | RATE               | TIONAL<br>FEE          |               | RATE                | ADDI-<br>TIONAL<br>FEE |
| 2  | Total  | • 22                                      | Minus          | - 2                                  | .0               | • 2                      |      | X\$ 97             | 50                     | OR            | X\$18=              |                        |
| ₹  | Independent                                    | • 3                                       | Minus          |                                      | 3.               | • -                      |      | X42=               |                        | OR            | X84=                |                        |
|  | I FIRST PRESE                                  | NTATION OF M                              | ULTIPLE DE     | PENDENT                              | CLARA            |                          |      | +140=              |                        |               | +280=               |                        |
|  | . /  |   |                |                                      |                  |                          | · L  | TOTAL              | 50                     | OR            | TOTAL               |                        |
| (  | 1/27/0   | // 97/05(Column 1) (Column 2) (Column 3)  |                |                                      |                  |                          |      |                    |                        | OR            | ADOIT, FEE          |                        |
| SENDMENT B   |  | CLAIMS REMAINING AFTER AMENDMENT          |                | HIGHE<br>HUMB<br>PREVIOUS<br>PAID F  | ST<br>ER<br>USLY | (Column 3) PRESENT EXTRA | ١    | RATE               | ADDI-<br>TIQNAL        |               | RATE                | ADDI-<br>TIONAL        |
| MO   | Total  | .21.                                      | Minus          | -2:                                  | 2                |                          |      | XS 9=              | FEE                    |               | YE40                | FEE                    |
|  | Independent                                    | . 2                                       | Minus          | ***2                                 |                  | •                        | ŀ    |                    |                        | <del>OR</del> | X\$18=              |                        |
| <b>(</b>   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                |                                      |                  |                          |      | X42=               |                        | OR            | X84=                |                        |
|  |  |   |                |                                      |                  |                          | L    | +140=              |                        | OR            | +280=               |                        |
|  |  |   |                |                                      |                  |                          |      | TOTAL<br>DOTT. FEE |                        | OR.           | YOYAL<br>ADDIT, FEE |                        |
|  |  | (Column 1)                                |                | (Colum                               |                  | (Column 3)               |      |                    |                        |               |                     |                        |
| 2  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENOMENT |                | HIGHE<br>MUNUBL<br>PREVIOU<br>PAID F | ER<br>JSLY       | PRESENT<br>EXTRA         | ſ    | RATE               | ADDI-<br>TIONAL<br>FEE |               | RATE                | ADDI-<br>TIONAL<br>FEE |
| MENOME   | Total  | •   | Minus          | **                                   |                  | •                        |      | X\$ 9=             |                        | CR            | X\$18=              | 7.6                    |
|  | Independent                                    | •   | Minus          |                                      |                  | •                        | -    | X42=               |                        |               | X84=                |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                |                                      |                  |                          | -    |                    |                        | OR            | ~~~                 |                        |
| ٠,   | f the entry in colu                            | an 1 is less than th                      | ector in coh   | ma 2. wrže 1                         | Of in each       | m 3                      | L    | •140=              |                        | OR            | +280=               |                        |
| -  | the "Highest Nor                               | mber Previously Pa                        | id For IN THE  | S SPACE IS                           | less than        | 20, enter "20."          | AC   | DIT. FEE           |                        | OR ,          | TOTAL<br>DOIT, FEE  |                        |
|  | The Highest Num                                | ber Previously Pair                       | For (Total o   | r Independen                         | i) is the        | yighest umaper           | town | n the app          | dopriate box           | to cat.       | ima 1.              | - 1                    |
| -  | PTO-875 (Rev. 12                               | DOA ' #18 On                              | Ameri Pirine C |                                      |                  |                          | -    | and Trades         | 12/1 Office, U.        | . DCD         | druguzas            | rangras                |